

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	-11		5-14-01
O.P.E. CLASSIFIER		4/3	6/26/01
FORMALITY REVIEW	ZA	1120	8/1/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ \_\_\_\_\_ Rejected  
 + \_\_\_\_\_ Allowed  
 (Through numeral) \_\_\_\_\_ Canceled  
 + \_\_\_\_\_ Restricted  
 N \_\_\_\_\_ Non-elected  
 I \_\_\_\_\_ Interference  
 A \_\_\_\_\_ Appeal  
 O \_\_\_\_\_ Objected

Claim	Date
1	10/1/01
2	10/1/01
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Best Available Copy

If more than 150 claims or 10 actions  
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